



STUDENT INTERN PROGRAMS
INFORMATION REQUEST FORM

NAME: _____

1. Do you have a family member who is an employee of Sandia National Laboratories (California or New Mexico)?

☐ Yes

☐ No

If **yes**, please list the name(s) and your relationship to the employee(s) (e.g. mother, father, sister, brother, spouse, etc.):

Name of Employee	Relationship

2. Current School/University: _____

Pursued degree: _____ (HS, BS/BA, MS/MBA, PhD, etc)

Major: _____

Expected graduation date: _____

3. Select the current level of academic study you are actively pursuing:

High School

☐ Freshman Year

☐ Sophomore Year

☐ Junior Year

☐ Senior Year

☐ High School Graduate

College

☐ Associates

☐ Bachelors

☒ Freshman Year

☒ Sophomore Year

☒ Junior Year

☒ Senior Year

☐ Dual Degree

☐ Masters Student

☐ PhD Student

☐ PhD ABD Student (has completed all course work, exams and has been advanced to candidacy)*

4. Select all earned degrees or levels of academic study

☐ High School diploma/equivalent

☐ Associates degree

☐ Bachelors degree

☐ Masters degree

☐ Other _____

5. Emergency Contact Information:

Name: _____ Relationship: _____ Phone #: _____
(xxx-xxx-xxxx)

6. Please indicate your shirt size:

☐ S ☐ M ☐ L ☐ XL ☐ XXL ☐ XXXL

*Advisor verification is required to confirm the student has completed all coursework, exams, and has been advanced to candidacy.